UNITED STATES BANKRUPTCY COURT

DISTRICT OF NEBRASKA

In re: JODY LEE MELOCCARO
KATHLEEN JANELLE MELOCCARO
Debtor(s)

Case No.: 09-82467-TJM

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Kathleen A. Laughlin, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. Section 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 09/17/2009.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C Section 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was converted on 10/19/2010.
- 6) Number of months from filing or conversion to last payment: 9.
- 7) Number of months case was pending: 18.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: 54,964.32.
- 10) Amount of unsecured claims discharged without full payment: .00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor: \$8,521.00 Less amount refunded to debtor: \$2,883.09

NET RECEIPTS: \$5,637.91

Expenses of Administration:

Attorney's Fees Paid Through The Plan: \$.00
Court Costs: \$.00
Trustee Expenses and Compensation: \$344.91
Other: \$.00

TOTAL EXPENSES OF ADMINISTRATION: \$344.91

Attorney fees paid and disclosed by debtor: \$500.00

Scheduled Creditors:						
<u>Creditor</u>		<u>Claim</u>	<u>Claim</u>	<u>Claim</u>	<u>Principal</u>	<u>Interest</u>
<u>Name</u>	<u>Class</u>	<u>Scheduled</u>	<u>Asserted</u>	<u>Allowed</u>	<u>Paid</u>	<u>Paid</u>
ALEGENT HEALTH	Unsecured	213.37	NA	NA	.00	.00
ALEGENT HEALTH	Unsecured	NA	NA	NA	.00	.00
AMERICAN NATIONAL BANK	Unsecured	9,514.95	9,649.63	9,649.63	.00	.00
AMERICAN NATIONAL BANK	Unsecured	NA	NA	NA	.00	.00
CHASE	Secured	NA	NA	NA	.00	.00
CHASE	Unsecured	NA	NA	NA	.00	.00
CHASE AUTO FINANCE	Secured	4,500.00	5,084.23	5,084.23	900.00	.00
CHASE AUTO FINANCE	Secured	500.00	NA	NA	.00	.00
CHRYSLER FINANCIAL SVCS AMERICA	Secured	9,540.00	22,847.32	22,847.32	4,293.00	.00
CITI MORTGAGE INC	Secured	NA	NA	NA	.00	.00
CITICORP TRUST BANK	Secured	16,720.69	16,630.29	16,630.29	.00	.00
CITICORP TRUST BANK	Secured	NA	4.55	4.55	.00	.00

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Creditor		<u>Claim</u>	<u>Claim</u>	<u>Claim</u>	<u>Principal</u>	<u>Interest</u>
<u>Name</u>	<u>Class</u>	<u>Scheduled</u>	<u>Asserted</u>	Allowed	<u>Paid</u>	<u>Paid</u>
CITIMORTGAGE INC	Secured	161,596.99	160,626.86	160,626.86	.00	.00
CITIMORTGAGE INC	Secured	1,500.00	4,872.81	4,872.81	.00	.00
CLAY M ROGERS	Unsecured	NA	NA	NA	.00	.00
DISCOVER FINANCIAL SVCS	Unsecured	12,275.52	12,443.33	12,443.33	.00	.00
ECAST SETTLEMENT CORP	Unsecured	3,449.65	3,467.27	3,467.27	.00	.00
ELKHORN FAMILY CARE	Unsecured	213.85	NA	NA	.00	.00
ENT SPECIALISTS	Unsecured	406.92	NA	NA	.00	.00
GE CONSUMER FINANCE	Unsecured	2,907.51	2,907.70	2,907.70	.00	.00
GE MONEY BANK	Unsecured	NA	NA	NA	.00	.00
GE MONEY BANK	Unsecured	NA	NA	NA	.00	.00
GE MONEY BANK	Unsecured	NA	NA	NA	.00	.00
GENERAL SERVICE BUREAU	Unsecured	NA	NA	NA	.00	.00
HELZBERG DIAMONDS	Secured	NA	NA	NA	.00	.00
HELZBERG DIAMONDS	Secured	NA	NA	NA	.00	.00
HSBC BANK NEVADA	Secured	250.00	250.00	250.00	.00	.00
HSBC BANK NEVADA	Unsecured	NA	744.23	744.23	.00	.00
HSBC BANK NEVADA	Unsecured	481.92	485.62	485.62	.00	.00
HSBC BANK NEVADA	Unsecured	723.39	695.69	695.69	.00	.00
JP MORGAN CHASE BANK	Secured	NA	NA	NA	.00	.00
KATHLEEN LAUGHLIN TRUSTEE	Special	NA	100.00	100.00	100.00	.00
KOHLS	Unsecured	480.34	NA	NA	.00	.00
KOHLS	Unsecured	NA	NA	NA	.00	.00
NEBRASKA FURNITURE MART	Secured	750.00	2,602.27	750.00	.00	.00
NEBRASKA FURNITURE MART	Unsecured	2,853.98	2,815.07	2,815.07	.00	.00
NEBRASKA METHODIST HEALTH SYST	I Unsecured	2,493.10	NA	NA	.00	.00
PHYSICIANS CLINIC	Unsecured	369.22	NA	NA	.00	.00
SONY FINANCIAL SERVICES	Unsecured	738.57	NA	NA	.00	.00
THE NEBRASKA MEDICAL CENTER	Unsecured	307.01	307.01	.00	.00	.00

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0058-1L-EPIEXX Case 99-82467-TJM Doc 145 Filed 03/29/11 Entered 03/29/11 09:59:18 Desc

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Creditor	01	Claim Schodulod	Claim Asserted	<u>Claim</u>	<u>Principal</u>	Interest
<u>Name</u>	<u>Class</u>	<u>Scheduled</u>	<u>Asserted</u>	Allowed	<u>Paid</u>	<u>Paid</u>
WEST ASSET MANAGEMENT	Unsecured	NA	NA	NA	.00	.00
Summary of Disbursements to Cree	ditors:			Claim	Principal	Interest
Secured Payments:				Allowed	Paid	Paid
Mortgage Ongoing:				177,257.15	.00	.00
Mortgage Arrearage:				4,877.36	.00	.00
Debt Secured by Vehicle:				27,931.55	5,193.00	.00
All Other Secured:				1,000.00	.00	.00
TOTAL SECURED:				211,066.06	5,193.00	.00
Priority Unsecured Payments:						
Domestic Support Arrearage:				.00	.00	.00
Domestic Support Ongoing:				.00	.00	.00
All Other Priority:				.00	.00	.00
TOTAL PRIORITY:				.00	.00	.00
GENERAL UNSECURED PAYMENT	S:			33,308.54	100.00	.00
Disbursements:						
Expenses of Administration:				\$344.91		
Disbursements to Creditors:				\$5,293.00		
TOTAL DISBURSEMENTS:						\$5,637.91

¹²⁾ The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such other relief as may be just and proper.

Date: 03/28/2011 By: /s/Kathleen A. Laughlin
Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. Section 1320.4(a)(2) applies.